MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) FILING DATE APPLICANT(S) AFTER AFTER 1st AMENDMENT 2nd AMENDMENT CLAIMS AS FILED IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. Ŧ Q_{i} Ø W. TÜ 31. r.L TOTAL TOTAL TOTAL DEP. TOTAL DEP. TOTAL CLAIMS TO WE III GOS 出於四 ISIAI. PTO-1350 (3-78) NAME OF THE PERSON OF THE PERS